

The Harris County Public Health did an excellent job quickly responding and creating rapid tools to monitor health throughout the incident at ITC Terminal. Data collection systems include:

- 1) Mobile health units deployed to the communities- reporting symptoms and complaints from those visiting the mobile units
- 2) SETRAC emergency reporting system- reporting from several nearby hospitals (#)
- 3) Syndromic surveillance collected through ESSENCE- 10 hospitals reporting symptom onset
- 4) Active surveillance calling local hospitals and urgent care clinics (33 facilities) not reporting to SETRAC or ESSENCE
- 5) Harris Health Nurse Help Line- reporting calls per day and the number referred to care centers.

Following these systems provided an understanding of health impacts from the incident. CDC/ATSDR suggested opportunities between Harris County Health and the Southeast Texas Poison Center/Texas Poison Center Network. CDC/ATSDR helped open a dialogue between Dr. Dana Beckham (Harris County Public Health) and Dr. Wayne Snodgrass (Medical Director of the Southeast Texas Poison Center) to explore a collaborative partnership in emergency preparedness, response, and recovery. For example, develop, post, disseminate health advisories and use established poison center infrastructure (e.g., 24/7 service, subject matter experts, telephone medical advice/consultation, triage, follow-up, information, and surveillance) during an incident or an outbreak. The Texas State Health Department also offered to reach out to the physicians who called the Poison Center during the incident to ask about their procedures related to benzene testing. We agree with the County that there is no medical reason to conduct biological testing for benzene; CDC/ATSDR would not recommend any biomarker testing or monitoring for benzene as a result of this incident. We discussed the following additional/optional tools or analyses to better characterize the clinical aspects of the incident:

- Review the Poison Center Data information provided by the State Health Department.
- Review historic ESSENCE data to compare similar symptoms reported across multiple years.
- Add questions to a CASPER to ask residents how they received information about the incident, how they found out about sheltering-in-place, if they had any symptoms they attributed to the incident, and if so, what they did to seek medical care.
- If interested in emergency responder health, create a rapid response registry to allow for follow up of responder health.
- Conduct a hospital survey to determine how the hospital handled or referred questions regarding the incident.